RIVER PINES CENTER 1800 SHERMAN AVE

STEVENS POINT 54481 Phone: (715) 344-1800 Ownership: Limited Liability Company Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled

Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? Yes Number of Beds Set Up and Staffed (12/31/04): 171 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/04): 171 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/04: 74 Average Daily Census: 59

Services Provided to Non-Residents		Age, Gender, and Primary Di	Length of Stay (12/31/04)	%					
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis		Age Groups 	%	Less Than 1 Year 1 - 4 Years	25.7 37.8		
Supp. Home Care-Household Services	No	Developmental Disabilities 2		Under 65	5.4	More Than 4 Years	36.5		
Day Services	No	Mental Illness (Org./Psy) 37		65 - 74	5.4				
Respite Care	No	Mental Illness (Other)	2.7	75 - 84	24.3		100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	51.4	*********	******		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	13.5	Full-Time Equivalent	5		
Congregate Meals No		Cancer 2.7 Nursing Staff pe				Nursing Staff per 100 Res	per 100 Residents		
Home Delivered Meals	No	Fractures	4.1	İ	100.0	(12/31/04)			
Other Meals	No	Cardiovascular	14.9	65 & Over	94.6				
Transportation	No	Cerebrovascular	13.5			RNs	14.8		
Referral Service	No	Diabetes	6.8	Gender	8	LPNs	13.4		
Other Services	Yes	Respiratory	2.7			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	12.2	Male	21.6	Aides, & Orderlies	63.4		
Mentally Ill	No			Female	78.4				
Provide Day Programming for			100.0	İ					
Developmentally Disabled	No			İ	100.0				
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Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other			Private Pay	2		Family Care			anaged Care	l		
Level of Care	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	1	2.3	136	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.4
Skilled Care	9	100.0	348	42	97.7	117	0	0.0	0	9	100.0	237	13	100.0	117	0	0.0	0	73	98.6
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende:	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	9	100.0		43	100.0		0	0.0		9	100.0		13	100.0		0	0.0		74	100.0

RIVER PINES CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Conditi	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period							
				9	% Needing		Total
Percent Admissions from:		Activities of	8	Ass	sistance of	% Totally	Number of
Private Home/No Home Health	12.6	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		83.8	16.2	74
Other Nursing Homes	1.1	Dressing	1.4		81.1	17.6	74
Acute Care Hospitals	85.2	Transferring	6.8		75.7	17.6	74
Psych. HospMR/DD Facilities	0.0	Toilet Use	6.8		74.3	18.9	74
Rehabilitation Hospitals	0.0	Eating	43.2		36.5	20.3	74
Other Locations	1.1	******	* * * * * * * * * * * * * * *	*****	* * * * * * * * * * * * * * * * * *	*******	*****
Total Number of Admissions	182	Continence		8	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	12.2	Receiving Resp	iratory Care	0.0
Private Home/No Home Health	18.0	Occ/Freq. Incontiner	nt of Bladder	51.4	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	38.9	Occ/Freq. Incontine	nt of Bowel	31.1	Receiving Suct	ioning	0.0
Other Nursing Homes	0.9	į			Receiving Osto	my Care	8.1
Acute Care Hospitals	10.4	Mobility			Receiving Tube	Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	5.4	Receiving Mech	anically Altered Diets	56.8
Rehabilitation Hospitals	0.0	į -			_	-	
Other Locations	13.3	Skin Care			Other Resident C	haracteristics	
Deaths	18.5	With Pressure Sores		13.5	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		2.7	Medications		
(Including Deaths)	211				Receiving Psyc	hoactive Drugs	33.8

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

		Owne	ership:	Bed	Size:	Lic	ensure:				
	This	This Proprietary		100	-199	Ski	lled	Al	1		
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities		
	%	%	Ratio	8	Ratio	%	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	34.9	84.2	0.42	86.9	0.40	87.7	0.40	88.8	0.39		
Current Residents from In-County	87.8	76.9	1.14	80.4	1.09	70.1	1.25	77.4	1.13		
Admissions from In-County, Still Residing	8.2	19.0	0.43	23.2	0.36	21.3	0.39	19.4	0.42		
Admissions/Average Daily Census	308.5	161.6	1.91	122.8	2.51	116.7	2.64	146.5	2.11		
Discharges/Average Daily Census	357.6	161.5	2.21	125.2	2.86	117.9	3.03	148.0	2.42		
Discharges To Private Residence/Average Daily Census	203.4	70.9	2.87	54.7	3.72	49.0	4.15	66.9	3.04		
Residents Receiving Skilled Care	100	95.5	1.05	96.9	1.03	93.5	1.07	89.9	1.11		
Residents Aged 65 and Older	94.6	93.5	1.01	92.2	1.03	92.7	1.02	87.9	1.08		
Title 19 (Medicaid) Funded Residents	58.1	65.3	0.89	67.9	0.86	68.9	0.84	66.1	0.88		
Private Pay Funded Residents	12.2	18.2	0.67	18.8	0.65	19.5	0.62	20.6	0.59		
Developmentally Disabled Residents	2.7	0.5	5.39	0.6	4.31	0.5	5.48	6.0	0.45		
Mentally Ill Residents	40.5	28.5	1.42	37.7	1.08	36.0	1.13	33.6	1.21		
General Medical Service Residents	12.2	28.9	0.42	25.4	0.48	25.3	0.48	21.1	0.58		
Impaired ADL (Mean)	53.5	48.8	1.10	49.7	1.08	48.1	1.11	49.4	1.08		
Psychological Problems	33.8	59.8	0.57	62.2	0.54	61.7	0.55	57.7	0.59		
Nursing Care Required (Mean)	10.1	6.5	1.57	7.5	1.35	7.2	1.40	7.4	1.36		